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AUTHOR Pomerantz, Sherry C.; Vergare, Michael J.
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ABSTRACT

As the human immunodeficiency virus spreads beyond homosexuals and intravenous drug users into the heterosexual community, there is heightened interest in the sexual behavior of sexually active young adults. There is little information on young adult black males, who may be at increased risk, since blacks in this country are contracting Acquired Immune Disease Syndrome (AIDS) at a rate higher than their proportion of the population. This study examined sexual behavior of a sample of heterosexual, sexually active, young adult, black male community college students (N=94), including condom use, length of time sexually active, number of sexual partners, sexual knowledge, and AIDS knowledge. The sample represented a lower middle class, upwardly mobile group. Subjects were knowledgeable about AIDS and generally knew that condoms could protect them from a virus. They were sexually active, although their activity varied a great deal. Knowledge about AIDS and about sexual physiology were not related to concerns about contracting AIDS or to condom use for this sample, nor were high risk behaviors or amount of sexual activity. The young men in this sample did not increase condom use as a result of learning about AIDS. Findings suggest that education about AIDS and condom use is not leading to desired changes in behavior. (ABL)

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SEXUAL BEHAVIORS AND AIDS CONCERNS AMONG YOUNG ADULT HETEROSEXUAL MALES

Sherry C. Pomerantz, Ph.D.
Michael J. Vergare, M.D.

Albert Einstein Medical Center
Department of Psychiatry
York and Tabor Roads
Philadelphia, PA 19141
(215) 456-7240

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TO THE EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)."

As the HIV virus spreads beyond homosexuals and intravenous drug users into the heterosexual community, there is heightened interest in the sexual behavior of sexually active young adults. While a body of research has developed describing AIDS related changes in sexual behavior among homosexuals (e.g., increased condom use), more limited data are available on heterosexuals. In particular, there is little information on young adult black males, who may be at increased risk, since blacks in this country are contracting AIDS at a rate higher than their proportion of the population (Mays & Cochran, 1987).

This paper describes the sexual behavior of a sample of heterosexual, sexually active, young adult, black males, including condom use, length of time sexually active, number of sexual partners, sexual knowledge, and AIDS knowledge. Further, the relationship between concern about contracting AIDS and the above factors is examined.

Specific questions addressed are:

1. Is concern about contracting AIDS related to age; alcohol use; knowledge about AIDS or about sexual physiology; and/or involvement in high risk behaviors, (e.g., multiple sex partners, sex with a prostitute)?

2. Is concern about contracting AIDS related to condom use?

These questions represent preliminary application of a model to predict condom use. In the present conceptualization, those who know about AIDS, behave in risky ways, and have had more sexual experiences would be expected to be concerned about contracting AIDS, since their behavior would put them at increased risk. These

concerns would be translated into condom use (See Figure 1). Concern about AIDS would be one of a number of factors in an expanded model of condom use predictors.

Sample: Ninety-four black males were randomly contacted from a community college population. They ranged in age from 18 to 25 years, with an average age of 21.3 years. The men typically lived at home with their mothers and were generally lower middle class (Table 1). (Socioeconomic status was assessed using Warner's Occupational Prestige Index (Warner, Meeker, Eels, 1949). This index was selected since it requires less detailed information about parents' work activities and does not require accurate estimates of income level.)

The men finished high school, but were not "typical" college students (29% repeated a grade; they were suspended from high school, on average, 1.8 times). Because participation was ultimately voluntary, the sample may not be representative of the black male population at the school.

Procedure: Men were interviewed by a black male interviewer in a private room at the college. The men were assured of confidentiality and told that their participation would not in any way affect their school work. The two hour protocol included a detailed interview and several paper and pencil tests, including assessment of sexual knowledge and self esteem (using the Coopersmith Self Esteem Inventory). These men were paid to

complete the protocol.

Results: Descriptive statistics are presented first, followed by the results of the correlations.

1. Descriptive statistics:

Sexual activity and Condom use: As a group, these men reported initiating sex at the age of 14 (range= 7 - 22; Table 2). Thirty-three percent had impregnated a female, with most babies aborted or miscarried. The men had sex approximately twice a week over the previous six months, with an average of 2.9 female partners (35% reported being monogamous over that period; Table 3). Sixty percent reported using some form of contraception all the time; 28% report using a condom all the time. Reasons for not using a condom (listed in Table 4) are consistent with other findings, i.e., not available, inconvenient, or detracts from pleasure (Siegel & Gibson, 1988).

Knowledge about AIDS: These young men did know basic information about AIDS. Almost all knew it to be a disease, 75% knew what the acronym stands for or something about what AIDS does to the body. They named at least one symptom (90%), identified one high risk group (92%), and listed at least one way to get AIDS (99%). Condom use was mentioned as a safe sex method by 94%, although only 65% believed a condom could protect them against AIDS.

Risk behaviors: Only 13% knew someone with AIDS. Most (92%) knew that contracting AIDS is serious. None felt it was likely they would contract AIDS, but 52% were at least somewhat concerned that they might contract AIDS.

These men participated in some AIDS risk behaviors (Table 5). A small minority (7%) had sex with a prostitute; none reported having sex with males or with intravenous drug users. Fourteen percent reported having had anal sex; 56% have had oral sex with women. In addition, 36% had three or more sexual partners in the six months before the interview.

Alcohol use: Alcohol use was assessed using an index designed to estimate general alcohol use (the Quantity-Frequency-Variability Index; Cahalan, Cisin, & Crossley in Lettieri, Melson, & Sayers, 1987). The index yields five categories of use, ranging from Abstainer to Heavy drinker. A large minority (31%) were heavy drinkers (Table 6).

2. Correlates of AIDS concerns and of condom use: **High risk behaviors** (anal sex, oral sex, number of sexual partners, having sex with a prostitute); **knowledge about AIDS; knowledge about sexual physiology; alcohol use**; and **age** were correlated separately with concern about contracting AIDS and with frequency of condom use. For the total group, there were no significant relationships between these variables (See Table 7). What these young men know about AIDS and about sex, and their sexual behaviors were only minimally related to concern about AIDS or to condom use.

One explanation for finding no significant relationships between condom use and the selected variables may be that the total sample represents too diverse a group, and any relationships are therefore obscured. In order to explore further the relationship between AIDS-related knowledge, AIDS risk behaviors, concern about AIDS and condom use, the sample was divided into three groups, based on frequency of condom use. In this second set of analyses, the factors were examined separately for Condom Non-users (N=20), Occasional users (use 1% thru 85% of the time; N=41), and Regular users (90% of the time or more; N=31). These groups were similar in age, in what they knew about AIDS, and in length of time sexually active (Table 8). They differed in that the Regular users had lower self esteem than the other groups ($F= 3.2$; d.f.=2,88; $p=.04$).

Not different in the amount of concern about AIDS, they did differ in the correlates to concerns (Table 9). For Regular users, concerns were related to age ($r=.50$) and to alcohol use ($r=.43$). For Non-users concerns were related to reported changes in AIDS risk behaviors ($r=.64$), length of time sexually active ($r=.54$), and having sex with a prostitute ($r=-.50$). For Occasional users, none of the factors examined were related to concern about AIDS. This last group may be so diverse, with such variability, that no relationships were significant.

Discussion: This sample represents a lower middle class, upwardly mobile group. As reported in other studies with samples

of similar ages (Sonenstein, Pleck, & Ku, 1989; Carroll, 1988), these young men were knowledgable about AIDS and generally knew that condoms could protect them from the virus. They were sexually active, although their activity varied a great deal. Most had had 2-3 sexual partners in 6 months. They were in long term relationships (about a year), but were not necessarily monogamous.

The analyses examined the relationship between knowledge about AIDS, risk behaviors, length of time sexually active, age, and alcohol use as correlates of concerns about contracting AIDS and of condom use. For the total population, the expected relationships were not significant. That is, knowledge about AIDS and about sexual physiology were not related to concerns about contracting AIDS or to condom use for this sample, nor were high risk behaviors or amount of sexual activity. The young men in this sample did not increase condom use as a result of learning about AIDS. This finding is consistent with data reported by others studying college samples (Baldwin & Baldwin, 1988; MacDonald, Wells, Fisher, et al, 1990).

However, different patterns of correlates of AIDS concerns were found for Condom Non-users, Occasional users, and Regular users. Among Regular Condom users, the older men (in their mid-twenties) and those who drank most (a variable also related to age) were more concerned about contracting AIDS. Among Non-users, there was a relationship between concerns about contracting AIDS and sexual behaviors. For instance, those who said they had made changes in their sexual behaviors (such as reducing the number of

sexual partners or reducing amount of oral or anal intercourse), the few who had sex with a prostitute, and those who had been sexually active the longest were more likely to be concerned about getting AIDS. These men were worried and made some changes in their sexual behavior. The relationship between concerns about AIDS and changes in sexual behavior have been reported among college students (Carroll, 1988; Ishii-Kuntz, 1988). However, for this sample, these concerns were not related to increased condom use nor to stopping sexual intercourse. They were not making the essential changes to reduce the risk of contracting AIDS.

For occasional users, none of the variables examined were moderately related to concerns about contracting AIDS or to condom use. This group requires further examination, as the diversity of sexual behavior patterns and condom use rates may have obscured any relationship between AIDS concerns and sexual behavior. These men were willing to use condoms, but were not using them regularly. Circumstances of use for this group need to be clarified to help determine the conditions under which they are motivated to use. Such information could be used for AIDS prevention programs.

In sum, these findings suggest that education about AIDS and condom use is not leading to desired changes in behavior. Future programs need to address Condom Non-users and Occasional users separately, as individuals in these groups may have different reasons for resisting change.

FIGURE 1

PROPOSED CORRELATES

OF CONDOM USE

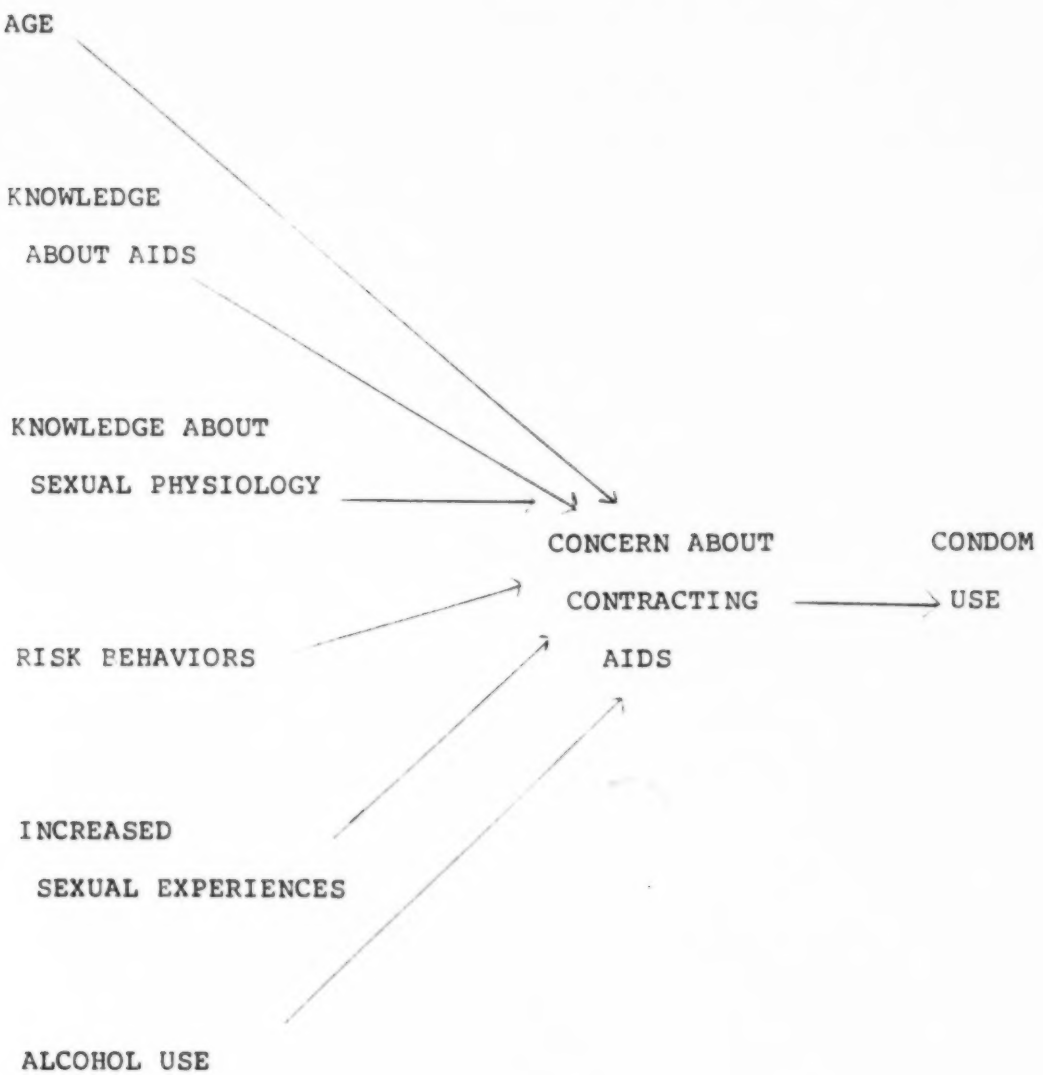

TABLE 1

SOCIO-ECONOMIC STATUS

(WARNER OCCUPATIONAL

PRESTIGE SCALE)

	PARENT		STUDENT	
OCCUPATIONAL RATING	N	%	N	%
1 Highest	2	2		
2	5	5		
3	3	3	8	9
4	10	11	15	16
5	6	6	29	32
6	1	1	13	14
7 Lowest	2	2	26	29

N = 29 N = 91

X = 3.8 X = 5.3

S.D. = 1.56 S.D. = 1.30

84% Aspire to Occupation in categories 1-3.

TABLE 2

AGE OF FIRST INTERCOURSE

AGE	N	PERCENT
7-10	8	8
11-14	37	39
15-18	45	48
19-22	4	4
TOTAL	94	

TABLE 3

NUMBER OF SEXUAL PARTNERS IN PAST 6 MONTHS

NUMBER OF SEXUAL PARTNERS	N	Percent
0	3	3
1	33	35
2	24	25
3	10	10
4	9	9
5	4	4
6	1	1
7	4	4
8	2	2
10 or more	3	3
TOTAL	93	

X = 2.9

SD = 3.6

35.7% HAD 3 OR MORE PARTNERS IN THE PAST 6 MONTHS

TABLE 4

REASONS FOR NOT USING A CONDOM*

	N	PERCENT
NOT AVAILABLE	27	38
INCONVENIENT	30	42
DETRACTS FROM PLEASURE	34	47
EMBARRASSED TO USE	3	4
PARTNER OBJECTED	14	19
WORRIED ABOUT SAFETY	12	17
MORAL OBJECTIONS	2	3
OTHER	3	4

*Percentage based on N = 72, excluding those who always use a condom and 2 missing.

TABLE 5

PERCENTAGE PARTICIPATING IN AIDS RISK BEHAVIOR

INTERCOURSE WITH A PROSTITUTE	7%
INTERCOURSE WITH ANOTHER MALE	0%
INTERCOURSE WITH A FEMALE IV DRUG USER	
ANAL SEX	14%
ORAL SEX	56%
THREE OR MORE SEXUAL PARTNERS	36%

TABLE 6

GENERAL ALCOHOL USE

	N	%
ABSTAINERS	15	16
INFREQUENT	14	15
LIGHT	19	20
MODERATE	16	17
HEAVY	29	31
TOTAL	93	

TABLE 7

SIMPLE CORRELATIONS WITH AIDS CONCERNS AND CONDOM USE FOR SELECTED VARIABLES

	CONCERNS		CONDOM USE	
	r	p	r	p
AGE	.19	06	.12	.25
KNOWLEDGE ABOUT AIDS	01	.88	.02	.81
SEX WITH A PROSTITUTE	.13	.22	.04	.33
KNOWLEDGE OF SEX	-.13	.21	.01	.45
ALCOHOL USE	.09	.20	-.03	.37
RISK BEHAVIORS	.18	.07	-.09	.37

TABLE 8

CHARACTERISTICS OF CONDOM NON-USERS, OCCASIONAL-USERS, AND REGULAR USERS

	AGE		KNOWLEDGE ABOUT AIDS		LENGTH OF TIME SEXUALLY ACTIVE	
	$\bar{X}$	S.D.	$\bar{X}$	S.D.	$\bar{X}$	S.D.
NON-USER	22.05	1.88	8.4	2.7	7.60	3.15
OCCASIONAL-USER	21.00	1.63	9.2	2.7	7.03	2.77
REGULAR-USER	21.22	1.87	8.3	3.1	6.44	2.82
	F = 2.42 N.S.		F = 1.04 N.S.		F = 1.00 N.S.	

TABLE 9

CORRELATIONS WITH CONCERN ABOUT AIDS
FOR REGULAR, OCCASIONAL, AND NON-USERS

	REGULAR (N=31)	OCCASIONAL (N = 41)	NON-USER (N=20)
AGE	.50*	-.06	.29
ALCOHOL USE	.43*	-.22	.15
KNOWLEDGE ABOUT AIDS	-.10	.01	-.10
KNOWLEDGE ABOUT SEX	-.24	-.12	.04
SEX WITH PROSTITUTE	-.25	.20	-.50*
CHANGES IN SEXUAL BEHAVIOR	.04	-.02	.64*
LENGTH OF TIME SEXUALLY ACTIVE	.33	.20	.53*

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